

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10002,077
Filing Date	December 22, 2006
First Named Inventor	Mark Ellis
Title	A Personal Communication Device
Art Unit	
Examiner Name	
Attorney Docket Number	CPL-1001

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint

Practitioner associated with the Customer Number: 29344

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number
OR

The address associated with Customer Number: 29344
OR

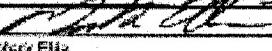
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	E-mail		

OR

Applicant/Assignee

Assignee of record of the entire claimed. See 37 CFR 3.71.
Statement under 37 CFR 3.73(c) is enclosed. (Form PTO/SB/60)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	17/6/07
Name	Mark Ellis	Telephone	46126555897
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire claimed or their representative(s) are required. Submit multiple items if more than one signature is required, see below.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.34. The information is collected in order to obtain a benefit by the public under 16 U.S.C. to conduct an application. Confidentiality is provided by 37 CFR 1.12 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the requested application form to the USPTO. This act may expire according to the individual case. Any comments or the amount of time you require to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND THIS OR COMPLETED FORM TO 1-800-PTO-8155. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-8155 and select option 2.